1505113385

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2013 OCT 28 AM 8: 23

Office Use Only CHITER

			Office Use Curing CELL 12
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
BULL BAILLE	E FOR CONE	nRESS.	
<u> </u>		<u> </u>	
ADDRESS (number and street) X ✓ (Check if address is changed)	1P.O. BOX 9.9		
		1 1 1 1 1 1 1 1 1 1	
	CITY A		STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDRES	ss		
✓ (Check if address is changed)		<u> </u>	
	Optional Second E-Mail Ad	idress	
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		
(Check if address is changed)		<u> </u>	
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2. DATE 0 2	2 20 13		
3. FEC IDENTIFICATION NU	JMBER ▶ C		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined th	is Statement and to the bes	t of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	Reuben	Cummings	
	7/1/		M M / D D / Y Y Y
Signature of Treasurer	can / Wh	ms,	Date 10 03 2013
		may subject the person signing to TION SHOULD BE REPORTED W	this Statement to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	